



October 2006 Update

Welcome

This is our first edition of VTAAC's quarterly newsletter. As we continue to make the transition from planning to implementation, we will be presenting this newsletter to the many members of our coalition to provide news, plans and other information. If you have any questions or information to be shared, please contact our editor, David Cranmer.

VTAAC Hires Partnership Coordinator

On September 5th, **David Cranmer** was hired to be the Coordinator for VTAAC, formerly the Vermont Cancer Coalition. Many of you know David as the Co-Chair of the Survivorship Work Group. He joined the Coalition's Steering Committee in October 2004 and has been an active volunteer in the development of VTAAC. David will be responsible for coalition administration, communications and outreach. He will be working at the American Cancer Society's Williston office, and can be reached at 802-872-6303 or david.cranmer@cancer.org. David will work closely with VTAAC co-chairs, Debbie Dameron, ACS, and Don Weaver, VCC; and also with John Olson, CCC Program Coordinator at VDH.

Survivor Focus Groups Completed

The Survivorship Work Group had developed goals to determine Vermont Cancer Survivor needs and find ways to address those needs. The first step was to hire a consultant, Erica Garfin of Montpelier, to create and facilitate a series of six Cancer Survivor Focus Groups. The research and planning started last winter and the focus groups were held in various parts of the state in June. Erica presented her final report to the organizing committee for the Vermont Cancer Survivor Network on Sept. 11, 2006. There were six areas of interest that were discussed, with Support, Access to Information and Emotional Well-being being key areas.

Here is a brief summary of the report:

* The most predominant theme throughout the various threads of the focus group study is that **support** plays a critical role for cancer survivors. Despite its importance, the need for peer support is being poorly met in the state.

*The majority of focus group participants described a profound and ongoing desire for **information**. Survivors want to have information offered to them at appropriate times rather than always having to search for it or be flooded with it at one time.

*The **transition at the end of treatment** was experienced as a difficult and sometimes frightening, even when outcomes are positive. Survivors are generally surprised by the depression and anxiety that occurs during these transitions because they are rarely advised that a period of emotional adjustment is common. Emotional support and counseling, like information, needs to be offered on an ongoing basis as individuals' needs change.

*Survivors were generally satisfied with the quality of their cancer-related care. The challenge for many comes in the area of **routine care and after-care**. Lack of clarity about whether to be followed by an oncologist or primary care provider is a concern.

*While almost all participants had health insurance of some kind, **costs and underinsurance** in its various forms were major issues for many. The link between insurance and employment is also problematic.

*Participants wished in hindsight that they had known how to be more involved in making decisions. The need for assistance with **service coordination, advocacy, and navigating service delivery** systems was a theme across the focus groups, but few had received this type of assistance.

If you would like a copy of the final report, please contact David.

Breast Cancer Cash Incentive Program Tested in Rutland and Chittenden Counties

Despite the availability of screening tests, deaths from breast cancer occur more frequently among women who are uninsured or underinsured. The American Cancer Society, the Vermont Dept. of Health's *Ladies First* Program, *Vermonters Taking Action Against Cancer* and TD Banknorth are teaming up to pilot a cash incentive program to encourage low income women to get a mammogram during Breast Cancer Awareness Month in October. The goal is to evaluate whether a cash incentive is effective in motivating women to get screened. The program will be piloted in Chittenden and Rutland counties where low screening rates for breast cancer have been identified. The target population is women eligible for the *Ladies First* program. Primary care providers in Chittenden and Rutland counties are invited to urge their low income patients over age 50 to take advantage of this limited-time opportunity.

During the months of September and October, the ACS will provide outreach through the cancer information networks and through newspaper and radio ads to offer cash incentives to women who qualify for mammograms through the *Ladies First* program. Women who get a mammogram will be given a coupon for a bank gift card in the amount of \$25. It is hoped that the cash incentive will attract many more women into the program and will help reduce some of the barriers that they may have in getting screened. For instance, transportation costs could be offset by the cash incentive.

The outreach specialists of the American Cancer Society and the *Ladies First* program in Rutland and in Chittenden counties are working with local media in those counties to publicize

the program. All *Ladies First* members, new and those coming in to be re-screened, will be given a cash card when they receive a mammogram during the months of October and November.

This program is a result of an agreement between the Vermont Department of Health (VDH) and the American Cancer Society in Vermont identifying the control of breast and cervical cancer as critical priorities.

Women interested in the project can call the American Cancer Society at 1-800-ACS-2345 for more information.

ACS Recognizes John Olson

At its annual Volunteer Recognition Meeting held on September 23rd, the American Cancer Society's Vermont Division recognized **John Olson**, VDH cancer control program coordinator, with a Volunteer Leadership Award for his work with VTAAC in the development, publication and implementation of the Vermont State Cancer Plan, 2006-2010.

John's invaluable contributions and leadership are nicely summed up in the ACS statement of nomination: "John Olson has created and nurtured the statewide cancer coalition, Vermonters Taking Action Against Cancer (VTAAC). This initiative has created new partnerships and a place where collaborations can take place that haven't happened before. In particular he has shown commitment to cancer patients and survivors. He has really listened to people who have recently experienced or are currently experiencing the ordeal of living with cancer. John attends more of the Relay for Life events than anyone but our Vice President for Development, and he uses this as an opportunity to connect with cancer survivors. He shows a real dedication to improving the lives of people who are battling cancer and their families. Under his leadership, a new cancer survivor network has been established that is a new set of resources for people with cancer."

John said, "I really must share the spotlight with my colleagues at the Vermont Department of Health who have guided, supported and encouraged me along the way, and provided leadership in many, many aspects of cancer control planning and implementation."

He also thanks the coalition's partners and members. "By definition, my role is to bring together skilled and dedicated professionals and individuals *to reduce the burden of cancer among all Vermonters*. That role has been made much easier and even enjoyable because of the people I get to work with every week. It has been my honor to work with this group of compassionate and dedicated individuals over the past several years. And I look forward to future collaborations as we implement the Vermont State Cancer Plan to reach our common goals for 2010."

Congratulations!

State Cancer Plan Status Report Developed

Liz Peterson, Department of Health Epidemiologist, has created a tracking form that we can use to mark our progress towards the 2010 goals of the **Vermont State Cancer Plan**. Presented at our August Steering Committee, the report lists each objective of the Plan and shows the most recent statistics available and compares them to the Plan's goals. The report (which is attached) is designed to be inserted into the 4-page Vermont State Cancer Plan summary. For a copy of the summary, go to: http://healthvermont.gov/pubs/cancerpubs/priorities_for_action.pdf .

Please take a moment to review our 5 priorities and 23 goals listed on the flyer. As we organize VTAAC to continue our progress in reaching our goals, we are asking our all our members to review the list and let us know what objective/goal you would like to work on. You will be hearing more on our implementation teams in the near future.

Major Collaboration Works to Promote Colon Cancer Screening

Each year, approximately 355 colorectal cancer cases are diagnosed in Vermont. Too many of these cancers are found at later, less treatable stages and many Vermonters are dying unnecessarily. The **Vermont State Cancer Plan** identified colon cancer as a key focus area and set a goal of increasing regular screening among Vermonters age 50 and over. In order to support this goal, The American Cancer Society is joining with three of the health insurance providers in Vermont (including Blue Cross and Blue Shield of Vermont, MVP and Medicaid), Fletcher Allen Health Care, the Vermont Cancer Center at UVM and Fletcher Allen, *Vermonters Taking Action Against Cancer*, the American College of Surgeons Commission on Cancer, AHEC and the Vermont Public Health Association to urge primary care physicians to promote the importance of colon cancer screening to your patients over age 50.

By the end of June, each insurer sent the names of their participants age 50 - 64 that have no insurance claim for colorectal cancer screening (colonoscopy, sigmoidoscopy or fecal occult blood test or FOBT) in the past five years to their primary care physician. They also sent a letter directly to each patient urging them to contact their doctor about getting screened. Baseline data has been collected and we hope to see a big increase in screening rates one year from now. If you have questions about this project, please contact Deborah Dameron at Debbie.Dameron@cancer.org

Call for Nominations

The American Cancer Society announces the Lane Adams Quality of Life Award recognizing exemplary cancer care.

The American Cancer Society gratefully acknowledges the many warm hands of service extended by caregivers to people living with cancer and their families. These extraordinary individuals from many disciplines and backgrounds enhance the quality of life of all people touched by cancer.

The Lane Adams Quality of Life Award recognizes individuals who have made a difference through innovation, leadership, and consistent excellence in providing compassionate, skilled care and counsel to patients and their families.

The 2007 American Cancer Society Lane Adams Quality of Life Award will accept nominations September 1, 2006, through November 1, 2006. Please take the time to nominate someone that you know is making a difference!

Nominations may be submitted online at: www.cancer.org/laneadams .

Save the Dates!

The New England Regional Minority Health Conference
“Eliminating Health Disparities by 2010:Economic and Moral Imperatives”
April 2, 3 & 4, 2007
Foxwoods Conference Center, Mashantucket, CT
www.NERMHC.com

VTAAAC Updates

Prevention.

On Thursday, November 16, 2006, millions of smokers will take part in the American Cancer Society’s 30th annual **Great American Smokeout®**. For three decades, the ACS has designated the third Thursday of each November as a day for smokers nationwide to unite and kick the deadly habit of smoking. For more information on the American Cancer Society’s **Great American Smokeout**, for a **Quitline** near you or smoke-free legislation please contact the American Cancer Society at 1-800-ACS-2345 or visit www.cancer.org.

The Coalition for a Tobacco-Free Vermont announces the hiring of **Kelly Stoddard** as their new Coalition Coordinator. Kelly starts in mid-October and will be based at the ACS office in Williston.

Early Detection.

October is Breast Cancer Awareness Month.
November is Lung Cancer Awareness Month and Family Caregiver Month.
January is Cervical Cancer Awareness Month and Radon Awareness Month.

Treatment.

Survivorship.

The implementation of the Plan’s Survivorship activities will be coordinated by the Vermont Cancer Survivor Network. The Network’s organizing committee met in September to work on developing action and organizational plans. Two immediate programs will be promotion of the results of the Survivor Focus Groups, and research and development of a peer-to-peer support system for Vermonters,

End-of-Life Care.

VDH is planning to role out the Advance Directives Registry this Fall or Winter.

Other notes

October 13th: Over 600 women and some partners attended the 9th Annual Breast Cancer and Women's Health Conference on. More than 12 VTAAC members presented workshops.

Fall 2006:

A Cervical Cancer Task Force has been convened by VDH to study and make recommendations relating to cervical cancer incidence, mortality, screening rates, as well as HPV vaccinations and testing. A report from the Commissioner to the General Assembly is due by February 1, 2007.

Implementation workgroups:

Please contact David Cranmer to express your interest and availability to work on one or more objectives as outlined in the Vermont State Cancer Plan. Review the full Plan at:

<http://Healthvermont.gov/cancer>

If you have additional information to be shared with other VTAAC members, please let David know.

Upcoming VTAAC Meetings**Steering Committee**

Friday, 11/17 – 1pm – ACS Williston

Friday, 12/15 – 1pm – ACS Williston

Colorectal Cancer Work Group

Wednesday, 10/15 – 3pm – ACS Williston